



**Testimony of Helen Benjamin, AARP Advocacy Volunteer, in
Support of H.B. 6461—AAC Presumptive Medicaid Eligibility for the Connecticut Home-Care
Program for the Elderly; and
S.B. 886—AAC Aging in Place
Aging Committee
February 26, 2013**

Good Morning Chairmen Serra, Ayala, Ranking Members Kelly, Adinolfi, and members of the Committee on Aging. I am Helen Benjamin, Advocacy Specialist for the AARP. As a nonprofit, nonpartisan organization, with a membership of more than 37 million, AARP's mission is to strengthen communities on issues that matter most to families, including health and long-term care.

In 2010, AARP in partnership with The Scan Foundation and The Commonwealth Fund released a multidimensional *Scorecard* to measure state-level performance of long-term services and supports for older adults and people with disabilities.¹ While Connecticut ranked 11 overall, our state received only mediocre scores in choice of setting and provider, support for family caregiving, and quality of care. Several proposals before you today will significantly improve Connecticut's long-term care system in all of these categories.

First, H.B. 6461 establishes presumptive eligibility for the Connecticut Home Care Program for Elders, which would expedite services and greatly improve the quality of life for both the individual and family caregivers.

H.B. 6461 addresses the significant delay older adults face when they try to access services and supports at home. Determining financial eligibility for Title XIX applicants for community based services in 2011 took an average of 134 days. The Standard of Promptness set by CMS requires action on an application within 45 days from presentation. Without timely decisions these applicants' health and well-being could be at risk and the long delay may determine whether they remain in a community setting or enter a nursing facility. The cost differential is steep. On average, the cost of serving a Medicaid client in the community is approximately one third the average cost of serving that person in an institution.

Under the proposal, presumptive eligibility would be available only to applicants of the Elder Waiver who meet or exceed skilled nursing home level of care. These are the neediest of the Medicaid application population. Connecticut already has presumptive eligibility for pregnant women and children. It is needed by our elders and is supported by the elder bar, the Southwestern Area Agency on Aging and AARP.

Next, AARP supports proposals in S.B. 886 that codify recommendations from the Aging in Place Taskforce. The proposed changes could be implemented at low or no-cost. They include improved access to supplemental nutrition, maximizing municipal matching grant funds to expand regional

¹ *Raising Expectations: A State Scorecard on Long-Term Services and Supports for Older Adults, People with Physical Disabilities, and Family Caregivers*, available at: <http://www.longtermscorecard.org/>

transportation, zoning changes, and enhanced consumer protections against elder and financial abuse.

AARP has also submitted written testimony in support of S.B. 883, S.B. 884, H.B. 6396 and H.B. 6462 for your consideration today. We ask your support to help people 50+ find the care they need and want, when they need it and in the setting of their choice. Thank you for your kind attention.

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